+

PTO/SB/01 (6-95) (modified)
Approved for use through 10/31/96 OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE U.S. Department of Commerce Patent and Trademark Office 0010/PTO 23019-07336 Attorney Docket Number Rev. 6/95 Harish R. Devanagondi First Named Inventor COMPLETE IF KNOWN **COMBINED DECLARATION (37 CFR** 1.63) AND POWER OF ATTORNEY FOR UTILITY OR DESIGN Application Number not yet known PATENT APPLICATION November 3, 2003 Filing Date Group Art Unit not yet known Declaration [X] Declaration OR Examiner Name not yet known Submitted after Submitted Initial Filing with Initial Filing As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SINGLE-CHIP MULTI-PORT ETHERNET SWITCH (Title of the Invention) the specification of which [x] is attached hereto OR _] as United States Application Number or PCT International | | was filed on (MM/DD/YYYY) [_] and was amended on (MM/DD/YYYY) [__ _] (if applicable). Application Number [_ I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations. § 1.56. I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? Foreign Filing Date Country Prior Foreign Application NO Not Claimed YES (MM/DD/YYYY) Number(s) 1.1 1 1 [] 1.1 1 1 [] 11 11 1 1 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto: I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below. Filing Date (MM/DD/YYYY) [] Additional provisional Application Number(s) application numbers are 11/01/2002 60/423,194 listed on a supplemental sheet attached hereto.

Page 2

DECI	LARATION							Page				
hereby claim the benefit under nternational application design claims of this application is no the first paragraph of Title 35, patentability as defined in Title prior application and the nation	r Title 35, United nating the United St disclosed in the punited States Code 37, Code of Fede	states of orior Uni e § 112, eral Regu	ted Sta Lackn lation	ates or lowledges § 1.56	PCT intege the du	ernat ity to beca	tional application disclose info me available	ition in toormation between	the manr n which n the fili	ner prov is mate ing date	rided b rial to of the	
prior application and the nation	PCT Par	ent	I	Par	rent Fili	ng D	ate	Pa	arent Pat	ent Nu	nber	
U.S. Parent Application Number	Numbe		-		M/DD/			(if app	if applicable)			
rumoer												
			ᆛ	17	-1		lomental pric	rity she	et attach	ed here	to.	
Additional U.S. or PCT in	nternational applic	ation nui	mbers	are list	ed on a	supp	nementar pric	nity sile	or ditue.			
As a named inventor, I hereby business in the Patent and Tra	appoint the follow	ving attor	rney(s herewi) and/or	r agent(s) to	prosecute thi	s applic	ation an	d to tra	nsact a	
Name Greg T. Sueok Eileen A. Lehma	a nn nd/or agent(s) nan	Regist Num 33,4 39,2	ration nber 800 2272	emental		tach	Name Robert Huls	se		R	egistra Numb 48,47	er
Please direct all correspondence		Fo S 8	enwic ilicon 01 Ca	Valley lifornia	est LLP Center Street CA 940	41						
Telephone (650) 335-72	46			0.0.71.	Fa	x	(650) 938-	5200				
I hereby declare that all statem are believed to be true; and fur are punishable by fine or imprestatements may jeopardize the Name of Sole or First	ther that these state isonment, or both, uvalidity of the appl	ements we under Sec lication o	ere ma ction 1 r any p A pet	001 of Toatent is:	Fitle 18 c sued then as been f	of the	United State	s Code a	ind that s	uch wil		
Given Name Harish		Middle Initial	R.		amily ame	De	vanagondi			30	1117	
Inventor's Signature							Date	e				
Residence: City Sarator	ga	Sta	ate	CA	Count	ry	USA Citizenship				India	
Mailing Address 1421	5 Juniper Lane											
Mailing Address												
City Saratoga			State	CA	Zip		070	Coun	try U	SA		
1 X 1 Additional inventors a	re being named on	suppler	nental	sheet(s) attache	ed he	ereto					

4 4

		B	
=	-	Į.	-

DECLARATION							ADDITIONAL INVENTOR(S) Supplemental Sheet								
Name of	Addit	ional Joint Inv	entor, if a	ny:		[]	A petitio	tition has been filed for this unsigned inventor							
Given	Harish		Middle Initial				Family Name Belur						S	uffix	
Inventor's Signature				,,,,,						Date				г	
Residence:	City	Saratoga		Stat	e (CA	Count	ry	USA			Citiz	enship	India	
Mailing Ac	ddress	14664C Big Ba	sin Way												
Mailing Ac	ddress			1	 ,							—			
City Sa	ratoga			Sta	ate	CA	Zip	95	070	C	Counti	ry	USA		
Name of	Addi	tional Joint Inv	entor, if a	ny:	T	ΙĪ	A petitio	on ha	s been	filed for	this u	ınsigı	ned inven	tor	
Given	Brian		Mid Initi	dle	A.		Family Name	Pe	tersen				S	uffix	
Inventor's Signature										Date	<u> </u>				
Residence	City	San Francisco		Stat	te	CA	Count	ry	USA			Citiz	zenship	USA	
Mailing A	ddress	151 Alice B To	klas Place#	512						e.a					
Mailing A	ddress										,				
City Sa	n Franc	risco		St	ate	CA	Zip	94	109	(Count	ry	USA		
						_									
Name of	f Addi	tional Joint Inv	ventor, if a	iny:	T		A petiti	on h	as been	filed for	this t	unsig	ned inver		
Name of Given Name	f Addi	tional Joint Inv	ventor, if a	ldle		Ť	A petition Family Name	on h	as been	filed for	this t	unsig		otor Suffix	
Given	f Addi	tional Joint Inv	Mid	ldle		Ť	Family	on ha	as been	filed for	this u	unsig			
Given Name Inventor's		tional Joint Inv	Mid	ldle	ite	Ť	Family		as been	<u> </u>	this t				
Given Name Inventor's Signature	: City	tional Joint Inv	Mid	ldle ial	ite	Ť	Family Name		as been	<u> </u>	r this u		S		
Given Name Inventor's Signature Residence	: City	tional Joint Inv	Mid	ldle ial	ate	Ť	Family Name		as been	<u> </u>	this		S		
Oiven Name Inventor's Signature Residence Mailing A	: City	tional Joint Inv	Mid	Sta	ate	Ť	Family Name		as been	Date	Count	Citi	S		
Given Name Inventor's Signature Residence Mailing A Mailing A	: City ddress ddress		Mid Initi	Sta	tate	Ť	Family Name Coun	try		Date	Count	Citi	S	Suffix	
Given Name Inventor's Signature Residence Mailing A Mailing A City Name o Given	: City ddress ddress	tional Joint Inv	wentor, if a	Sta Sta	tate	Ť	Family Name Coun	try		Date	Count	Citi	zenship	Suffix	
Given Name Inventor's Signature Residence Mailing A Mailing A City Name o Given Name Inventor's	: City ddress ddress		Mid Initi	Sta Sta	tate	Ť	Family Name Coun Zip A petiti Family	try		Date	Count	Citi	zenship	Suffix	
Given Name Inventor's Signature Residence Mailing A Mailing A City Name o Given Name	: City ddress ddress		wentor, if a	Sta Sta	tate	Ť	Family Name Coun Zip A petiti Family	ttry on h		Date filed for	Count	Citi	zenship	Suffix	
Given Name Inventor's Signature Residence Mailing A Mailing A City Name o Given Name Inventor's Signature	: City ddress ddress		wentor, if a	Sta Sta	tate	Ť	Family Name Coun Zip A petiti Family Name	ttry on h		Date filed for	Count	Citi	zenship	Suffix	
Given Name Inventor's Signature Residence Mailing A Mailing A City Name o Given Name Inventor's Signature Residence	: City ddress ddress f Addi :: City		wentor, if a	Sta Sta	tate	Ť	Family Name Coun Zip A petiti Family Name	ttry on h		Date filed for	Count	Citi	zenship	Suffix	
Residence Mailing A Mailing A City Name o Given Name Inventor's Signature Residence Mailing A City A Mailing A City City City City City City City City City	: City ddress ddress f Addi :: City address		ventor, if a Mic Init	Sta Sta Sta Sta Sta Sta Sta	tate		Family Name Coun Zip A petiti Family Name Coun Zip	on h	as been	Date filed for Date	Count	Citi	zenship	Suffix	